



COUNTY OF SAN BERNARDINO

STANDARD PRACTICE

DEPARTMENT

BEHAVIORAL HEALTH

SUBJECT

MEDICATION ONLY CASES

NO. 13-1.13

Joyce Lewis, L.C.S.W. PAGE 1

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APPROVED

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I. PURPOSE

To provide adequate psychiatric care and follow up for patients who are psychiatrically stable and do not need counseling or treatment in the outpatient department.

II. PROCEDURE

1. The psychiatrist who is well acquainted with the patient will select those who can be treated with medication support services only.
2. The attending psychiatrist will periodically review his or her caseload and determine which clients are stable enough not to need individual, group, or other mental health services.
3. When there is a change in psychiatrist assigned to these cases, the medication support patient will have to be re-evaluated by the (new) accepting psychiatrist. The responsible psychiatrist will determine whether or not these patients need additional services.
4. Patients who have been stable for at least two years as evidenced by **not** needing inpatient hospitalization, crisis intervention or screening by emergency services (AES) will be considered as possible candidates for medication support services only.
5. Patients whose medications are being adjusted will not be referred.
6. The psychiatrist will be responsible for insuring the following forms are completed and updated: Community Functioning Evaluation, AIMS scale, physical assessment, medication consent, Medicare form, as well as medication support services progress notes. **Chart compliance will be monitored by the clinic supervisor.** Any deficiencies identified will be corrected as soon as possible. Any problem regarding compliance will be referred to the Deputy Directors for Medical Services and Community Treatment Services.
7. The psychiatrist is also responsible for ensuring that the diagnosis (Axis I-V) is reviewed and updated annually whether patients are on medication or not.

**III. WHEN TO DISCONTINUE PATIENTS AS MEDICATION ONLY CASES**

1. When patients decompensate to the point that they need more intensive treatment;
2. When patients are hospitalized in a psychiatric inpatient unit;
3. When patients are in crisis and/or utilize Emergency Services.

**IV. LIST OF PATIENTS**

1. A list of medication support only patients will be updated semi-annually by clerical staff, a copy will be forwarded to the Clinic Supervisor, Program Manager, appropriate Deputy Director, Assistant Director, and Medical Services Office on January 15 and July 15 or the first work day after these dates.

**This policy will apply to ALL CLINICS OF THE DEPARTMENT OF BEHAVIORAL HEALTH.**

NCB/jmp

### MEDICATION ONLY CASES

CLINIC \_\_\_\_\_

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